

<h2 style="margin: 0;">TRANSMITTAL FORM</h2> <p style="font-size: small; margin: 5px 0;">(to be used for all correspondence after initial filing)</p>		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="padding: 2px;">Application Number</td><td style="padding: 2px;">10/787337-Conf. #3987</td></tr> <tr><td style="padding: 2px;">Filing Date</td><td style="padding: 2px;">February 26, 2004</td></tr> <tr><td style="padding: 2px;">First Named Inventor</td><td style="padding: 2px;">Stephen J. Todd, et al.</td></tr> <tr><td style="padding: 2px;">Art Unit</td><td style="padding: 2px;">2171</td></tr> <tr><td style="padding: 2px;">Examiner Name</td><td style="padding: 2px;">Not Yet Assigned</td></tr> <tr><td style="padding: 2px;">Attorney Docket Number</td><td style="padding: 2px;">E0295.70199US00</td></tr> </table>	Application Number	10/787337-Conf. #3987	Filing Date	February 26, 2004	First Named Inventor	Stephen J. Todd, et al.	Art Unit	2171	Examiner Name	Not Yet Assigned	Attorney Docket Number	E0295.70199US00
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Attorney Docket Number	E0295.70199US00													
Total Number of Pages in This Submission	4													

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Cited References
<div style="border: 1px solid black; width: 100px; height: 20px; float: left; margin-bottom: 5px;">Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	WOLF, GREENFIELD & SACKS, P.C.		
Signature			
Printed name	Scott J. Gerwin		
Date	March 29, 2007	Reg. No.	57,866